FORM D

UNITED STATES **SECURITIES AND EXCHANGE COMMISSION** Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES

ON			

OMB Number:

3235-0076

Expires: May 31, 2002

Estimated average burden

hours per response: 16.00

SEC USE ONLY

PURSUANT TO REGULATION D, SECTION 4(6), AND/OR	Prefix Serial
MAY 1 5 2003 UNIFORM LIMITED OFFERING EXEMPTION	DATE RECEIVED
ONIFORM LIMITED OFFERING EXEMPTION	I I
195/4	
Name of Offering (School of this is an amendment and name has changed, and indicate change.)	_
Goldman Sachs Global Event Driven, LLC: Units of Limited Liability Company Interests Filing Under (Check box(es) that apply): □ Rule 504 □ Rule 505 ☑ Rule 506 □	Section 4(6) □ ULOE
Type of Filing: New Filing Amendment	3 Section 4(0) 11 OEOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Goldman Sachs Global Event Driven, LLC	03058875
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (including Area Code)
c/o Goldman Sachs Princeton LLC, 701 Mount Lucas Road, Princeton, New Jersey	(609) 497-5500
08540	
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including PROEESSE
(if different from Executive Offices)	INGGEOOL
Brief Description of Business	MAY 1 9 2003
To operate as a private investment fund.)
	THOMSON FINANCIAL
Type of Business Organization	
□ corporation □ limited partnership, already formed	✓ other (please specify):
□ business trust □ limited partnership, to be formed	Limited Liability Company
Month Year	
Actual or Estimated Date of Incorporation or Organization: 1 1 0 1	☑ Actual ☐ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbrevia	tion for
State: CN for Canada; FN for other foreign jur	isdiction) D E
CENTED AT INCOMPLICATIONS	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
* Each promoter of the issuer, if the issuer has been organized within the past five years;
* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
* Each general and managing partner of partnership issuers.
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual) Goldman Sachs Princeton LLC (the Issuer's Managing Member)
Business or Residence Address (Number and Street, City, State, Zip Code)
701 Mount Lucas Road, Princeton, New Jersey 08540
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ General and/or *of the Issuer's Managing Member Managing Partner
Full Name (Last name first, if individual)
Blood, David W.
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Goldman Sachs Princeton LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ General and/or *of the Issuer's Managing Member Managing Partner
Full Name (Last name first, if individual)
Clark, Kent A.
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Goldman Sachs Princeton LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ General and/or *of the Issuer's Managing Member Managing Partner
Full Name (Last name first, if individual) Ford, David B.
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Goldman Sachs Princeton LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☑ Director* ☐ General and/or *of the Issuer's Managing Member Managing Partner
Full Name (Last name first, if individual)
Hillenbrand, M. Rock
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Goldman Sachs Princeton LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☑ Director* ☐ General and/or *of the Issuer's Managing Member Managing Partner
Full Name (Last name first, if individual)
Levy, Tobin V.
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Goldman Sachs Princeton LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☑ Director* ☐ General and/or *of the Issuer's Managing Member Managing Partner
Full Name (Last name first, if individual)
Walker, George H
Business or Residence Address (Number and Street, City, State, Zip Code)
C. 1. D. A. T. C. 804 March 1

c/o Goldman Sachs Princeton LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

A. BASIC IDENTIFICATION DATA
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* Each promoter of the issuer, if the issuer has been organized within the past five years;
* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
* Each general and managing partner of partnership issuers.
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director ☐ General and/or *of the Issuer's Managing Member Managing Partner
Full Name (Last name first, if individual) Gall, Natalie M.
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Goldman Sachs Princeton LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply:
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)-
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply:
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply:
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
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454981.13 3 of 9 SEC 1972 (7-00)

				B. INI	FORMAT	ION ABO	UT OFFI	ERING				
	-										Yes	No
1. Has the	e issuer sold	l, or does th			to non-accre			•				Ø
			Α	inswer also	in Appendi	x, Column	2, if filing u	inder ULOE				
2. What is the minimum investment that will be accepted from any individual?								\$1,000,000*				
					retion, may unit?						Yes ☑	No
commi If a per or state	ssion or sin rson to be li es, list the n	nilar remune sted is an as ame of the	eration for s ssociated pe broker or de	olicitation or age caler. If mo	ho has been of purchasen ont of a broke ore than five for that bro	rs in connecter or dealer e (5) person	ction with sa registered vs s to be lister	ales of secur with the SE	rities in the C and/or wi	offering. th a state		
Full Name	(Last name	first, if ind	ividual)									
Goldman,	Sachs & C	0.										
Business o	r Residence	Address (N	Number and	Street, City	y, State, Zip	Code)		·		-		
85 Broad	Street, Nev	y York, Nev	w York 100	04								
		roker or De										
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if ind	ividual)									
Business o	or Residence	e Address (I	Number and	Street, City	y, State, Zip	(Code)						
Name of A	ssociated B	Broker or De	ealer			·						
					o Solicit Pu						F-1 4.1	1.0.
•					[CO]	[CT]						l States
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Full Name	(Last name	first, if ind	ividual)									
Business o	r Residence	Address (1	Number and	Street, City	y, State, Zip	Code)						
Name of A	ssociated E	Broker or De	ealer									
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Offering Price			Amount Already Sold
	Debt	\$	0	_	\$_	0
	Equity (Shares)	\$	0	_	\$_	
	□ Common □ Preferred			_	-	,
	Convertible Securities (including warrants)	\$_	0	_	\$_	0
	Partnership Interests	\$_	0	_	\$_	0
	Other (Specify: Units of Limited Liability Company Interests)	\$_	84,056,666		\$_	84,056,666
	Total	\$_	84,056,666		\$_	84,056,666
	Answer also in Appendix, Column 3, if filing under ULOE.				_	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					
			Number Investors			Aggregate Dollar Amount of Purchases
	Accredited Investors		63	_	\$_	84,056,666
	Non-accredited Investors		0	_	\$_	0
	Total (for filings under Rule 504 only)	_	N/A	_	\$_	N/A
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.					.
	Type of offering		Type of Security			Dollar Amount Sold
	Rule 505		N/A		\$	N/A
	Regulation A	_	N/A	_	\$	N/A
	Rule 504	_	N/A	_	\$	N/A
	Total		N/A	_	\$_	N/A
tl tl	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.	_		-	-	
	Transfer Agent's Fees]	\$_	0
	Printing and Engraving Costs)	\$_	0
	Legal Fees		5	1	\$_	177,727
	Accounting Fees		5	7	\$_	20,000
	Engineering Fees			כ	\$_	0
	Sales Commissions (specify finders' fees separately)		5	7	\$_	252,170
	Other Expenses (identify)		E	3	\$_	0
	Total		5	Ž	\$_	449,897

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXP	ENS	ES A	ND USE OF P	ROCE	EDS	
	b. Enter the difference between the aggregate offering price given in response to - Question 1 and total expenses furnished in response to Part C - Question 4.a difference is the "adjusted gross proceeds to the issuer."	. Thi	is		\$_		83,606,769
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proto be used for each of the purposes shown. If the amount for any purpose is not be furnish an estimate and check the box to the left of the estimate. The total payments listed must equal the adjusted gross proceeds to the issuer set forth in reto Part C - Question 4.b. above.	knowi of th	n, ie		_		
				Payments to Officers, Directors, & Affiliates			Payments To Others
	Salaries and Fees		\$_	0		\$_	0
	Purchase of real estate		\$_	0		\$_	0
	Purchase, rental or leasing and installation of machinery and equipment		\$_	0	. 🗆	\$_	0
	Construction or leasing of plant buildings and facilities		\$_	0		\$_	0
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		\$	0		\$	0
	Repayment of indebtedness		\$	0	-	\$	0
	Working capital		\$	0		\$	0
	Other (specify): Investment Capital		\$	0	- ☑	\$	83,606,769
	Column Totals		\$_	0	_ 🗹	\$_	83,606,769
	Total Payments Listed (column totals added)			☑ \$	83,6	506,76	59
	D. FEDERAL SIGNATU	DF				_	·
f	The issuer has duly caused this notice to be signed by the undersigned duly authoral collowing signature constitutes an undertaking by the issuer to furnish to the U.S. So it is staff, the information furnished by the issuer to any non-accredited investor pursue.	orized ecurit	perso	d Exchange Comi	nission,	upon	
	ldman Sachs Global Event Driven, LLC Signatute Make Model			Date May 13, 2003			
	me of Signer (Print or Type) Title of Signer (Print or Type)			1.24) 20, 2000			
	talie M. Gall Vice President of the Issuer's Mana						

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).